



Original communication

Men as victims of intimate partner violence

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ARTICLE INFO

Article history:

Received 23 April 2011

Accepted 20 July 2011

Available online 12 August 2011

Keywords:

Intimate partner violence

Male victims

Female perpetrators

Portugal

ABSTRACT

Introduction: Intimate partner violence is an important worldwide problem. In general, men are considered perpetrators of this type of violence, but they can also be victims. The experience of men as victims of intimate partner violence is not yet described and characterized in Portugal. The aim of this study is to contribute to characterize this phenomenon to better understand it, including the temporary and permanent physical harm to men's health, in a medico-legal and forensic perspective.

Material and methods: This study is a retrospective analysis of 535 suspected cases of male victims of intimate partner violence, aged 18 years or older, observed in the Clinical Forensic Medicine Department of the North Branch of National Institute of Legal Medicine of Portugal, between 2007 and 2009.

Results: Over this period, 4646 suspected victims of intimate partner violence were examined; 11.5% ($n = 535$) of them were men. Male victims' age range was 18–89 years, with an average of 41 years; 61.5% were married; all of the documented cases had completed primary instruction; most of them were employed; 16.2% reported being victims of childhood abuse. The alleged perpetrators were all females; their age range was 19–81 years, with an average of 38 years; 9.3% had history of alcohol abuse and 12.1% had a psychiatric disorder; 11% claimed to have been abused in the childhood. Victims were married to the perpetrators in 63.9% of the cases; 81.6% had previous history of intimate partner violence, however, most of them did not report it to the authorities and only a minority sought medical care (8.1%) because of this previous abuses. Concerning the reported violent episode, the most common mechanisms of aggression were scratching (18.9%), punching (16.7%) and hit with a blunt object (16.6%). The most common injury was an abrasion; upper limbs were the most frequent injury's location; 96.1% healed in less than 9 days; 4.9% had sequelae (scars); 36.9% sought medical care.

Conclusions: The reported cases of intimate partner violence against men represent 11.5% of the total of these cases observed in the medico-legal services of Porto. This number may be bigger because men tend to underreport and hide this kind of victimization, and also because injuries usually are mild (women perpetrate psychological abuse and minor acts of physical violence). Male victims may benefit from preventive and informative public policy campaigns.

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1. Introduction

Intimate partner violence (IPV) is an important worldwide problem.^{1,2} It is a type of Domestic violence defined by the World Health Organization as "any behaviour within an intimate relationship that causes physical, psychological or sexual harm to those in the relationship".^{1,2} Such behaviours include acts of physical violence

(e.g., slapping, kicking, pushing), emotional or psychological abuse (e.g., intimidation, humiliation) and any kind of sexual coercion.¹ It can be perpetrated by a current or former partner (including a date) or spouse, in a heterosexual or in a same-sex relationship.^{1–3} Intimate partner violence has physical, psychological, psychiatric, social and occupational negative outcomes for the victim and his/her family.^{3–5}

The patriarchal model of the society supports the idea that IPV is a gender issue, perpetrated by men toward women.^{6,7} In general, men are stronger than women, therefore, they appear to be less vulnerable to violence perpetrated by an intimate partner.⁶ Women

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are considered the most important victims of this type of interpersonal violence while men are more likely to be victims of violence perpetrated by a stranger or an acquaintance. Meanwhile, several studies on IPV found equivalent rates of assault perpetrated by men and women.^{8,9} Archer conducted a meta-analytic review and he concluded that women were more likely than men to perpetrate at least one act of physical violence toward their male partners and they did it more frequently.¹⁰ These studies were criticized by many researchers on this subject who refused to accept that men were also victims of this kind of interpersonal violence.⁶ To explain these results, some authors consider that IPV can be divided in two major categories: (1) “Intimate terrorism” which is characterized by the use of violence to take control over the victim and (2) “Situational couple violence” which is a consequence of the escalation of a conflict or a series of conflict, without systematic control by one partner.^{11–13} According to this concept proposed by Johnson,¹¹ “intimate terrorism” is a type of violence perpetrated only by men toward women while “situational couple violence” can be perpetrated by both female and male partners. Despite these controversies, it cannot be denied that men are like women victims of violence perpetrated by their partners, even if the abuse is less severe than the abuse committed by men toward women.⁹ Thus, IPV should not be considered only a gender issue, but it should be viewed as a human issue.¹⁴

In Portugal, IPV is the second most common type of interpersonal violence.¹⁵ In 2010, 26.1% of the crimes against people reported to the police authorities were cases of IPV. Within these cases, 18% of the victims were men.¹⁵

Men as victims of IPV have been a subject of study for some researchers since the early studies in the 1980s.^{16–21} Most of them are descriptive retrospective analysis and reviews of the literature about the subject. The majority of these studies focus on the prevalence of male victims of IPV, characterization of the violent episode, including motives and mechanisms of aggression and its consequences for the victim.^{15,16,19,20} Some studies compare male victims of IPV with female victims of this type of violence.^{10,22,23}

The characterization of IPV perpetrated against men is important to better understand this phenomenon and to assess the need to create public policies in order to prevent it. In Portugal, this subject is not yet completely studied; therefore, the aim of this study is to characterize the experience of men as victims of IPV to provide more information, which can be used to recognize these victims and to develop preventive strategies.

2. Material and methods

The present study is a retrospective analysis of suspected cases of male victims of IPV which were observed in the Clinical Forensic Medicine Department of the North Branch of National Institute of Legal Medicine of Portugal (INML), between 2007 and 2009.

A research was conducted through a database of the Department to select cases of male victims aged 18 or more years old, alleged victims of aggression perpetrated by an intimate partner (male or female), such as spouses, former spouses, boy/girlfriends or lovers, who were observed during the referred period. The final study sample included 535 cases.

To collect data a questionnaire previously developed to study female victims of IPV was adapted and applied. The study variables included socio-demographic characteristics of both victims and alleged perpetrators, such as: (a) age, marital status, level of instruction, occupation, alcohol or drugs abuse, criminal history, history of mental illness and history of childhood abuse; (b) demographic characteristics of eventual children; (c) some characteristics of the relationship between the victim and the alleged aggressor and history of violence prior to the current episode; (d)

description of the present episode, such as the mechanism of injury and the eventual health consequences. Due to the retrospective nature of the study, it was not possible to collect all data of the different variables.

Data was collected from medico-legal and social reports of the aggression episode. A statistic analyse was performed using the software *PASW Statistics 18*. Descriptive statistics was performed using frequency analysis for categorical variables and descriptive analysis for continuous variables.

3. Results

Over the 3-year period, 4646 suspected victims of IPV were examined at the Clinical Forensic Medicine Department of the North Branch of the INML, 11.5% ($n = 535$) of these cases were male victims. The distribution of these cases showed a slightly tendency to increase between 2007 and 2009 (28.2%, 33.1% and 38.7%, respectively).

3.1. Alleged victims' characterization

Considering the alleged victims, the age range was 18–89 years old (mean = 41; median = 40); nearly 1/2 of the victims were between 34 and 49 years old; most of them were married ($n = 329$; 61.5%), divorced ($n = 86$; 16.1%) or single ($n = 80$; 15%). Data on the level of instruction was available only in 215 cases. Within these cases, all of them completed at least the primary instruction, 24.6% had completed the ninth grade ($n = 53$) and only 18 men (8.4%) attended the university. Most of the victims worked in protection, security or personal services ($n = 216$; 42.7%); 13% ($n = 70$) of the victims were unemployed. The information about alcohol or drug abuse was reported in 220 cases; 5.9% were alcohol and/or drug consumers. Only 2 of the victims had a criminal record, but the type of the crime committed was not specified in the reports. A psychiatric disorder was reported by 25 victims (4.7%). Data concerning history of childhood abuse was present in only 222 cases; 16.2% of these males ($n = 36$) referred to be abused in the childhood; the perpetrator was always a relative of the victim: in 52.8% of the cases there was more than one perpetrator; in 77.8% ($n = 28$) one of the perpetrators was the victim's father and only in 25% ($n = 9$) the victim's mother was one of the abusers; the most common types of abuse reported was psychological (77.8%) and physical (30.5%).

3.2. Alleged perpetrators' characterization

In this sample, the alleged perpetrators of IPV were all women. Their age was documented in 313 cases; age ranged from 19 to 81 years old (mean = 38; median = 36). The information about the level of instruction was present in 223 cases; within these cases, the majority had completed the primary instruction (99.1%), 23.7% the ninth grade and 12% the university education. The professional occupation of the suspected aggressors was documented in 308 cases; most of them worked in protection, security or personal services ($n = 154$; 50%). Data concerning substance abuse was present in 259 cases; within these cases, 9.3% ($n = 24$) of the perpetrators had history of alcohol abuse and only 2 of them (0.8%) had history of drug abuse. In 285 cases (53.3%) there was not information regarding criminal history; in the remainder cases, 96.4% of the abusers did not have a criminal record. Victims reported in 12.1% of the cases that their aggressor had a psychiatric disorder. History of violence in the childhood was reported in 11% of the cases, but this information was absent in 60.9% of them; the type of abuse and the perpetrator were not specified in any case.

3.3. Characterization of household's children

Data on common children of the victim and the offender who were living in the same house was available in 338 cases. In 55% of the cases the couple lived together with their children; 55.8% of children were younger than 10 years old and only 11.5% were older than 18 years old. There was no information whether the children witnessed IPV episodes or not.

3.4. Characterization of the relationship between the alleged victim and the perpetrator, and history of previous violence

Concerning the relationship between the victim and the alleged perpetrator, in 63.9% ($n = 342$) of the cases they were married and in 21.5% of the cases they had a common law marriage; only 3.9% of them were dating. Information about the current situation of the couple was documented in 470 cases; 64% ($n = 302$) were cohabiting and most of them for a period between 1 and 15 years ($n = 134$; 44.4%); 36% ($n = 168$) were separated, 48% of them for less than a year. Previous history of IPV was reported in 81.6% ($n = 323$) of the documented cases ($n = 396$). The combination of psychological and physical abuse was the major type of violence perpetrated by the aggressor (55.7%). In the remainder cases, victims reported only physical (19.8%) or psychological abuse (17%) (Tables 1 and 2). Eight men referred being victims of economic exploitation that consisted in the destruction of personal property.

In a large number of cases the beginning of the abuse occurred during the period between the first and the fifth year of cohabitation. The duration of the IPV was documented in 243 cases; in 81.9% of these cases the abuse lasted for five years. Information about frequency of the violent events in the last 12 months was not available. Victims did not report the abuse in 73% of the documented cases ($n = 306$), but 31.7% of those who denounced the aggression to the authorities did it more than one time. There was not information about the number of denied or withdrawn accusations. Data concerning the number of times that the victims need to seek medical care was present in 246 cases; only 8.1% of the victims sought medical care. After the violent episode, only 144 victims sought for help; 50% ($n = 72$) of them reported the abuse to the police and 36.1% were examined in a medico-legal service. Information about eventual social support received was not available in the reports.

3.5. Characterization of the last episode of violence

Concerning the violent episode that motivate the observation in the medico-legal service, in 72 of the cases, violence was perpetrated by multiple offenders and not only by the partner (13.5%); in

Table 2
Mechanisms of physical aggression.

	<i>n</i>	%
Insults, humiliations and false accusations	202	60.3
Threatening to use a sharp instrument to hurt the victim	33	9.8
Controlling relationships with neighbors, friends, colleagues and relatives	25	7.4
Stalking or spying	21	6.3
Destruction of victim's affective objects	19	5.7
Controlling the use of phone	11	3.3
Others	24	7.2

37.5% ($n = 27$) of these cases a son/daughter of the victim was one of the offenders.

In 50.3% ($n = 269$), a single mechanism of aggression was used by the offender and in 49.7% ($n = 266$) multiple mechanisms were used. The most common mechanisms of aggression used by the perpetrator were scratching (18.9%), punching (16.7%) and aggression with a blunt instrument (16.6%) (Table 2); in 21.5% of the cases, the alleged perpetrators used an object to assault the victim.

Male victims sought medical care in 39.6% of the cases ($n = 212$).

Type and anatomical distribution of injuries are resumed in Table 3. Victims presented injuries in 76.6% of the cases ($n = 410$). Abrasion was the most common injury (53.8%) and in a large number of the cases, they were located in the upper limbs (35.8%). The expected time to heal was documented in 385 cases and in 96.1%, it was less than 9 days. Information about eventual permanent physical consequences was present in 384 cases; within these, only 4.9% ($n = 17$) presented sequelae, which consisted in scars.

4. Discussion

Nowadays, IPV is recognized as a serious problem, which affects the personal and familial well-being.^{1,2} Men are not considered traditional victims of this type of violence.^{8,9} Nevertheless, between 2007 and 2009, male who denounced cases of IPV in Porto, accounted for a relevant portion of all the victims of this type of violence examined at the Clinical Forensic Department of the North Branch of the INML (11.5%). This rate is smaller but not significantly different from the published Portuguese national rates (18%)¹⁵ and the referred for USA.²⁴ Public awareness about this problem has increased over the years, therefore, it is expected a rising of the number of victims who seek for help. The number of men who were examined showed a slight tendency to increase over the 3-year period analysed in this study, but these results may not be representative of the general population, because it only reflects the

Table 1
Mechanisms of psychological abuse ($n = 335$).

Mechanism	Previous violent events ($n = 388$)		Current violent event ($n = 914$)	
	<i>n</i>	%	<i>n</i>	%
Scratching	52	13.4	173	18.9
Punching	54	13.9	153	16.7
Blunt instrument	65	16.7	152	16.6
Slapping	60	15.5	95	10.4
Kicking	46	11.9	83	9.1
Biting	17	4.4	62	6.8
Pushing	43	11.1	53	5.8
Grabbing	18	4.6	48	5.3
Other instrument	0	0	23	2.5
Sharp instrument	11	2.8	21	2.3
Others	22	5.7	51	5.6

Table 3
Types and anatomical distribution of injuries.

		<i>n</i>	%
Anatomical distribution (<i>n</i> = 709)	Cranium	83	11.7
	Face	165	23.3
	Neck	60	8.5
	Thorax	73	10.3
	Abdomen	17	2.4
	Upper Limb	254	35.8
Injuries (<i>n</i> = 587)	Lower Limb	57	8.0
	Abrasions	316	53.8
	Contusions/Bruises	161	27.5
	Swelling/edema	45	7.7
	Hematoma	18	3.1
	Lacerations	42	7.1
	Others	5	0.8

victims who denounced the abuse and went to the medico-legal services. In a large number of cases, men underreport their victimization by an intimate partner, especially because they fear to be an object of ridicule.^{6,21,25} In a patriarchal society, it is expected that men are not abused by women, but currently in western societies, where there is greater gender equality, the rate of male victims of IPV is significant.^{2,26}

Intimate partner violence is a cross-sectional problem that affects people of all ages.^{1,5} In this study, the victims' mean age was 41 years old and ½ of them were between 34 and 49 years old. This information is consistent with the findings of a study which analysed male victims of IPV who called to a domestic abuse helpline.¹⁷ However, some studies on this subject refer that violence perpetrated against men is more common in younger couples and that the overall rate of IPV tend to decrease with the aging of the couple.^{10,27,28}

Several researchers tried to identify risk factors for IPV, in order, to prevent it.^{2,27,28} Some of these risk factors, such as educational level, employment status, alcohol or drug abuse and childhood abuse, were analysed in this study.^{2,27,28} According to these studies, it was expected that most of the victims had a low educational level. However, more than 1/2 of the victims completed the ninth grade or a higher level. This result could be overestimated due to the lack of data on the educational level in more than a half of the reports. Only 13% of the victims were unemployed, which is not as significant as it was expected. Regarding alcohol or drug abuse, most of the victims denied consuming these substances; this situation can be due to social desirability bias and to the fact that this information could be used in the court to undermine victims' credibility. The witnessing of inter-parental abuse or the experience of violence in the childhood is accepted as an important risk factor of IPV.^{2,27,28} A considerable number of men reported that they were victims of physical or psychological abuse in the childhood perpetrated by a close relative.

The association between victims' psychopathology and IPV is not yet fully understood.⁶ In this study, a minority of the victims reported a psychiatric disorder. Psychiatric and psychological disorders, such as depression, stress and psychosomatic symptoms, could be consequences of IPV.²⁰

In the present study, the alleged perpetrators were all women. Female perpetration of IPV is a study subject for several researchers.^{23,29–33} According with these studies, women are as capable as men to perpetrate violence against their intimate partners and they do it more frequently.^{10,23,29,30} They also initiate physical violence as often as men do it.^{10,23} In this study, age range of female perpetrators was comparable to the age range of the victims. Once again, this result is not consistent with other studies, which found a higher prevalence of IPV in younger couples.^{10,27,28} Risk factors for women's perpetration of IPV are similar to those associated with men's perpetration.^{23,30} The most common risk factors referred in other studies are childhood abuse, mental illness and alcohol or drugs consume.^{17,23,30} The amount of female perpetrators with these risk factors was lower than it was expected; only approximately in 10% of the cases, one of the referred risk factors was present. However, it was not possible to confirm the presence of these risk factors in a large number of cases due to the retrospective nature of the study. Violence perpetrated by women is more accepted by the society than violence perpetrated by men, because women are less capable to cause severe injuries to their partners.^{6,9–11,18} However, female perpetrators of IPV are at higher risk to become victims of violence perpetrated by their partners, therefore, this behaviour should not be encouraged.^{9,28} Information on the perpetrators was collected through the victims' report, which cannot be as accurate as it was desirable, due to the presence of reporting bias.

Intimate partner violence has also negative impacts in the familial well-being.^{1,2,4} In this sample, more than 50% of the victims

and the perpetrators had common children living with them. As referred above, children who witness inter-parental abuse are at higher risk to be injured and, also, to become perpetrators or victims of IPV.^{2,17,23,27,28,30} However, the cases studied had no information concerning witnessing IPV episodes. Nevertheless, these children must be considered potential targets of preventive strategies, in order to lower the prevalence of IPV.

Concerning the relationship between the victims and the perpetrators, in the majority of the cases they were married and lived together for at least one year. These results are consistent with findings of other studies, which refer that IPV is more common in recently married couples.^{19,34} Most of them had prior history of violence. In these cases, the abuse was initiated during the period between the first and the fifth year of cohabitation and it lasted for the past five years prior to the present examination. Prior history of violence is one of the most important risk factors for IPV.^{27,28} Usually, violence severity increases over the time.^{19,34} This phenomenon may explain the period between the beginning of violence and the examination in a medico-legal service, because in the beginning minor acts of violence could not justify the need to seek for help. The combination of psychological and physical abuse was the major type of violence reported by victims. These findings are consistent with other studies.^{32,34} Psychological abuse is considered a predictor of physical violence^{34,35}; this type of violence was reported in more than 70% of the analysed cases. In some studies, prevalence of psychological abuse is even higher and it is suggested that this type of violence is a normative behaviour in intimate relationships.^{32,36} Although the most common mechanisms of psychological abuse were humiliations and insults, some of the victims reported more serious violence, such as threats to hurt with a sharp instrument, control behaviours and economic exploitation. These mechanisms are more associated with the "intimate terrorism" defined by Johnson.^{11,12} These findings support the idea that men are also victims of severe violence as stated by other studies.^{6,29,32} In this sample, physical violence was the most prevalent type of abuse reported by the victims, but only a minority of them needed medical treatment after it, which is consistent with the findings of other studies.^{5,6,10} Several researchers argued that men tend to underreport their victimization because they fear to be an object of ridicule and many of them do not consider this behaviour a crime,^{6,24,37} (probably, for cultural reasons and because injuries are almost mild).

The most recent violent episode was perpetrated by the intimate partner and other offenders in a significant percentage of the cases (13.5%). These situations may be responsible for more serious injuries. The most common abuse mechanisms were scratching, punching and aggression using an object as a weapon. These findings are similar to the results of other studies, although in some of these studies the most common mechanism was slapping.^{6,17,18,21,22} Usually, women are not so strong as men, therefore, they tend to use methods which are not strength dependent.^{6,18} After the violent event, nearly 40% of the victims sought medical care. This result is higher than it was expected, because other researchers on this subject stated that usually, men's injuries are not severe to seek for medical treatment.^{10,38} In this study, 76.6% of the victims were injured. Almost all of them had only mild injuries, such as abrasions, contusions and bruises, located in the upper limbs (35.8%) or in the face (23.3%). This distribution is not the expected because in abusive cases head and face are the locations most frequently injured.³⁹ Several researchers stated that violence perpetrated by women may be justified by retaliation or self-defence, in reaction to their partner's violence or abuse.^{40–42} This possibility cannot be excluded and can explain the high number of injuries in the upper limbs. Despite it, the majority of the cases described in this study appear to be in the category of "situational couple violence", but in some cases, "intimate terrorism" cannot be excluded.

In more than 95% of the cases, the expected time for injury cure was less than 9 days. The results are consistent with other studies on this subject.^{5,6,9,10} Therefore, the search for medical care should not be so frequent; this situation may be due to the idea that seek for medical care could be important for medico-legal proof in cases of IPV. None of the victims presented severe consequences; despite these findings, several authors referred that men may be seriously injured.^{16,20,29,30,33} Intimate partner violence may have psychological negative outcomes in the victims,²⁰ however, these possible effects were not assessed in the present study.

The present research has several limitations. One of the most important limitations is its retrospective nature, which did not allow collecting data on all the variables. Also, information on the experience of violence was provided only by the victims, which may be a source of bias, such as recall bias and social desirability bias. Finally, despite of its relevance, it was not possible to study the judicial sentences of these cases.

5. Conclusions

The results of this study allowed us to conclude that:

- Men can be victims of IPV and they represent a significant proportion (11.5%) of the victims observed in the Clinical Forensic Medicine Department of the North Branch of the INML;
- Women were perpetrators of this kind of violence in all the studied cases;
- Prior history of physical and psychological violence was frequent (81.6%);
- The most common mechanisms of assault consisted in minor acts of physical violence, which resulted in mild injuries (76.6%), 35.8% of them in the upper limbs;
- Almost all the victims did not present physical sequelae.

In spite of the inexistence of serious physical injuries, it should be given more attention to male victims of IPV. Further studies are necessary to assess psychological and psychiatric effects of IPV in the male victims. These victims may benefit from preventive public policy and from more informative campaigns on this subject.

Conflict of interest statement

We state that neither the author or any of the co-author have any potential conflict of interests related to the publication of this paper.

Funding

None declared.

Ethical approval

None declared.

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